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(Ad	Idress)		
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D. BRUCE
JUL 0 3 2012
EXAMINER

COVER LETTER

TO: Registration S	Section	4.	
Division of Co	orporations	F4	
•			
SUBJECT:	FTL Andrews Gardens Third Are Name of Limited Liability Company	LLC	
,	Name of Limited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.		
Please return all corresp	nondence concerning this matter to the following:		
	Kevin Downs		
	Name of Person		
	Firm/Company		
	5725 Lake Washington Rd Address	- 111 121 1 1 1 1 1 1 1 	
		25. 5	
	Melborru, FL 32934 City/State and Zip Code		
	·	ACTARY AHASSE	100 a
	E-mail address: (to be used for lature annual report notific		7773 1716
For further information	concerning this matter, please call:	cation) C. F. CORID	į
		1	
Keuin		280	
Name	of Person Area Code & Daytime	e receptione Number	
Enclosed is a check for	-		
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy	\$60.00 Filing Fee, Certificate of Status &	
	(additional copy is enclosed)) Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Flor	lity Company as it now appears on our records.) da Limited Liability Company)
he Articles of Organization for this Limited Liabili	y Company were filed on 10/5/10 and assigned
lorida document number	·
his amendment is submitted to amend the followin	:
. If amending name, <u>enter the new name of the</u>	imited liability company here:
FTL AL	Third Ave LLC
he new name must be distinguishable and end with the L.L.C.".	words "Limited Liability Company," the designation "LLC" or the abbrev
nter new principal offices address, if applicable	5725 Lake Washinston Rd
Principal office address MUST BE A STREET A	DRESS) Melbovin, FL 32934
	ARY SSEE
nter new mailing address, if applicable:	5 705 Lake Washington Rd
Mailing address MAY BE A POST OFFICE BOX	Walponing LE 3937
•	
 If amending the registered agent and/or registered agent and/or the new registered office 	gistered office address on our records, <u>enter the name of the ddress here</u> :
Name of New Registered Agent:	1Levin Downs
New Registered Office Address:	5725 Lake Washington Rd
	Enter Florida street address
	City , Florida 32934 Zip Code
	G:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = M MGRM =	anager Managing Member	•			
<u>Title</u>	<u>Name</u>		Address		Type of Action
					Add
					Remove
	<u> </u>				Add Remove
	·	 			Add Remove
					Add
					Remove
					Add Remove
					Add Remove
D. If amen	iding any other informat	ion, enter change	e(s) here: (Attach addi	tional sheets, if necessary.,)
_					7
				——————————————————————————————————————	MW29
_					
				<i></i>	
Dated	June 18	<u>, 20</u>	<u>) </u>		
	Sign	nature of a member	or authorized representat	ive of a member	
		Kevin Typed o	Downs or printed name of signed	· · · · · · · · · · · · · · · · · · ·	

Page 2 of 2

Filing Fee: \$25.00